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Developing and Field-Testing an Adolescent-Responsive Maternal and Newborn Health (MNH) Counseling Approach in Kasese District, Uganda

Participatory study protocol and formative findings framework

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Adolescents' voices guide counseling across the continuum of care.

INTRODUCTION

Stigma, provider bias and inadequate counseling limit pregnant and parenting adolescents' access to quality maternal and newborn health services.

METHODS

Design: two-phase participatory mixed-methods study across seven purposively selected public health facilities.

Phase One: formative assessment with adolescents, companions and providers.

Phase Two: co-design counseling tools and job aids with healthcare workers and Ministry of Health representatives, followed by field-testing.

OBJECTIVE

Develop, field-test and refine counseling that responds to adolescent needs during antenatal care, labor and delivery, and the postpartum period in Kasese District.

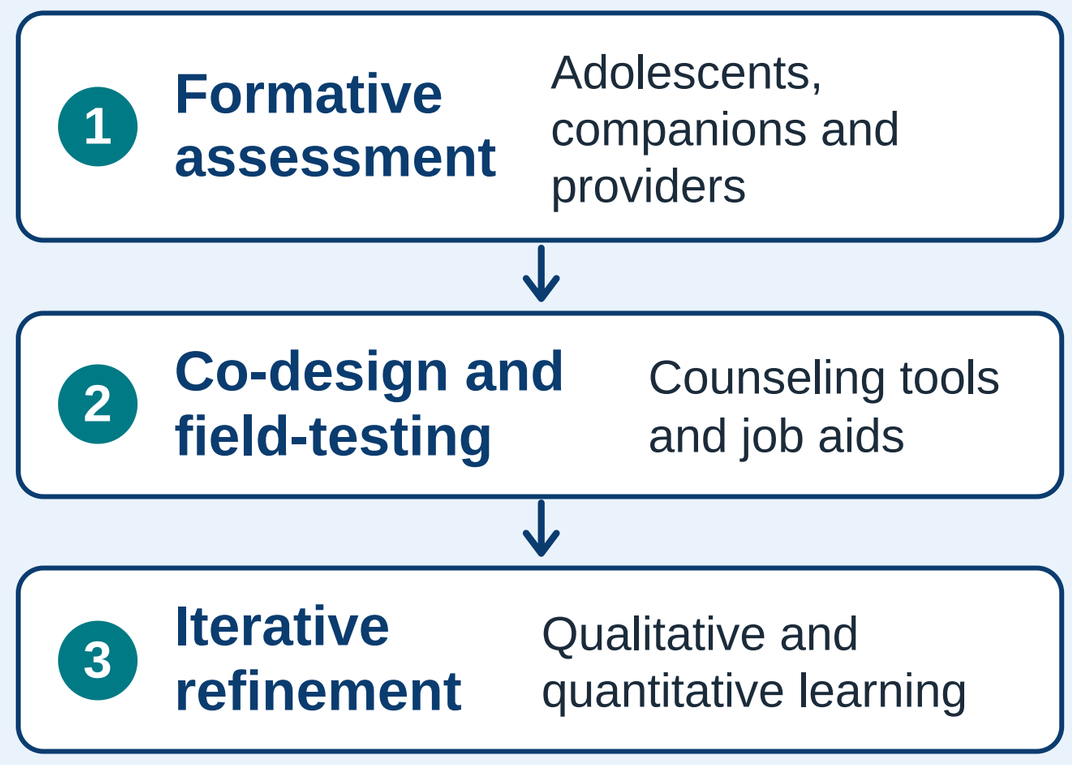


Figure 1. Study phases (author's own diagram)

RESULTS AND STUDY STATUS

PROTOCOL AND FORMATIVE WORK: NO FINAL OUTCOMES YET

Data collection is ongoing. Findings are presented as a formative framework, not as final outcomes.

Formative engagement explored barriers, stigma and service gaps to inform tool design.

Learning activities

- Focus group discussions
- Pulse polls
- Pause-and-reflect sessions

Thematic content analysis and descriptive statistics will integrate findings and guide iterative refinement.

DISCUSSION

The approach embeds adolescent voices in intervention design and covers the full continuum of care. Implementation must balance adolescent needs with the capacity of facilities operating with limited resources.

CONCLUSIONS

The study aims to produce practical counseling tools, guides and adaptation guidance to improve equitable service access.

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